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Everything was in readiness, as they stepped aboard our ship. Under their escort we continued some five miles up the river into Rotterdam, which seemed a vast sea of ships, wedged closely together in the harbor, and continuing up into the canals, or water streets,to the very door-steps of the warehouses. Very busy the harbor was and our entrance brought blasts of welcome from all the boats. Rotterdam was our last port and Rear-Admiral Ward and Captain Rust were thankful to have us all landed safely without a mishap.

The following day shore leave was granted and we were permitted to go up into the city. How picturesque we all found Holland, even those who had seen it before, and we hoped that it might take a long time to unload, that we might have more time to play there. The next day was the visit of the Queen of Holland's consort, and everyone had to be in attendance at the reception. We had one more day for it took some time to load all the supplies for the Austrian and German units into the freight cars which were to be attached to the train that Germany had sent for us. This day gave us an opportunity to motor to the Hague, Delft, Haarlem, Amsterdam and Scheviningen. Holland was so peaceful that it was difficult to realize the next countries were at war.

The special train was finally ready, and we were bundled in bag and baggage, surgical supplies, instruments, stretchers, ether, chloroform, cotton, bandages, gauze, rubber gloves, medicines, hospital clothing, and we were never separated from these supplies at any time, all arriving in Gleiwitz, October 17.

For diplomatic reasons we had to stay in Berlin for a few days, and for final disposition into the eastern field of war, we had to remain for a few days in Breslau, but we were expeditiously placed by the German Red Cross, one unit at Kosel and the other at Gleiwitz. The Austrian units remained with us on the same train until we reached a point very near these cities, when we separated, each unit eager and anxious to get to work.

A BRIEF HISTORY OF MATERIA MEDICA

By LINETTE A. PARKER, R.N.
New York, N. Y.

(*Continued from page 653*)

Roman Empire. In the centuries immediately following Hippocrates, schools of medicine flourished, but they theorized about the nature of disease, set up rivalling systems of treatment, and failed to promulgate the rational methods initiated by Hippocrates. In the Roman Empire, the medical profession for two or three centuries, just before the time of Christ, was in disrepute; only slaves and freedmen would deign to be doctors. Caesar, in the first century B.C., first gave the science encouragement by granting citizenship to those practicing medicine. Pliny boasts that for six hundred years Rome had no physicians. While this probably was not true, still the conditions encouraged no progress in the profession. The fact that cabbage was a universal remedy and that dislocations were treated by magical songs shows the great ignorance among the Roman doctors.

During the Middle Ages no art or profession advanced. During the Reformation the medical men were still so busy arguing about theories and dogma that they, too, marked time. It was not until the seventeenth century, almost 2000 years after the time of Hippocrates, that a marked step forward was taken in medical knowledge except in pharmacy. This was introduced into Europe in the eleventh century by the Arabs.

There are a few important names, however, during this period.

Celsus. In the first century, A.D., there lived a Roman patrician named Celsus who wrote a book on the history of medicine. It was found about fifteen hundred years after that time and is about the only source of information in regard to the status of medicine in Celsus' own time and in preceding centuries.

Galen. Galen, a Greek, living in Rome in the early Christian era, was a very prolific medical writer. He collected and coordinated in a remarkable manner, all medical knowledge to which he had access, sifting out the good of all the wrangling schools of medicine. To this he added results of his own observation and left invaluable records of his profession. Galen prepared and preserved in his writings many medicinal recipes. The adjective "galenical," derived from his name, is in common use; "galenical" preparations being those made by physical processes, as extracts, tinctures and infusions in distinction from alkaloids, glucosides and chemically-extracted principles. But Galen's writings, like all others, slumbered on in oblivion until the Renaissance of Learning (fifteenth century) and then his doctrines predominated all others for two hundred years. About 1550 a doctor in England was called before the College of Physicians for impugning the authority of Galen. He recanted, acknowledged his heresy, and was pardoned. Galen's idea of the action of drugs was very primitive. He classified all drugs as hot, cold, moist, or dry. He believed in curing by contraries; a moist drug was indicated for a dry condition of the mouth or skin, a hot one for a chill, etc.

Dioscorides. Dioscorides of Cilicia about 78 A.D. wrote a materia medica which is still an authority on plants and drugs of ancient times. He traveled extensively in Syria, Africa, Spain, Italy, and attained a really remarkable knowledge of medicinal plants. He described five hundred different plants and was the first to study them morphologically thus separating pharmacognosy from medicine.

Jews as Physicians. It is a very strange fact that during the Middle Ages the court physicians were all Jews. The men of that race in all other fields were hated, but their general intelligence and their skill in magic won for them the highest esteem in court life as physicians.

Salerno. Just at the close of the Middle Ages in the tenth century there arose a very important school of medicine at Salerno, a Roman colony in southern Italy. This school was the connecting link between ancient and modern medicine. A chronicle of Salerno, (we may believe it or not) relates that the school was founded by a Jewish Rabbi, a Greek, a Saracen, and a native of Salerno, each of whom lectured in his own language. Whether true or not, Salerno was a very cosmopolitan place where royalty and great people flocked for their health. The skill in preparing medicine developed here was very great, although the treatment was largely diet, etc. The school produced a book, *Antidotarium,* a collection of formulae for compounding medicine, which for several centuries was a standard book, but it was merely a compilation from earlier works. The laws governing the practice of doctors and apothecaries worked out here form the basis of all modern laws. A traveler in Salerno today finds not the slightest trace in tablet or ruin of the great people who lived and worked there seven and eight hundred years ago and there is now not even a respectable hotel or inn where a tourist can stay over night.

Arabs. The reputation of Salerno was, after about two centuries, overshadowed by the influence of Arabian medicine. During the centuries of decline in Europe the Arab civilization was at its height, and Arabian medicine introduced with other sciences into Europe in the eleventh century predominated all Europe for nearly two hundred years. Arabian medicine was the result of many influences. The Hindus, Greeks, and Jews all contributed to the growth of the science in that advancing civilization. The Arabs developed not only schools of medicine, but schools of pharmacy. They made new medicinal preparations and considerable advance in determining the action of drugs. They formulated the first known pharmacopeia. The general outline of modern pharmacy and many names and forms of drugs as we know them originated with the Arabs. Senna, benzoin, alcohol borax, and myrrh are all words of Arabic origin. Pharmacy was separated from medicine by them in the eighth century; but it was not legalized as such in Europe until the Arabian medicine was introduced into Europe three centuries later. The one name which still survives as great, from the Arabs, is that of Avicenna a philosopher and physician who lived 980–1037 A.D. His book, *Canon of Medicine*, brought him fame in both Europe and Asia.

Renaissance. The predominance of Arabian medicine in Europe was destroyed by the revival of the classics in the fourteenth century, including the works of Hippocrates, Galen, and Celsus. The writings of these men were never before widely known and the study of them brought new information, not only about systems of medicine, but also about the properties of medicinal plants. The discovery of America also brought many new plants, and of more importance still, was the introduction of chemical schools of medicine from the stimulus given by a famous German doctor, Paracelsus, who lived 1490-1541.

Paracelsus. Paracelsus was an arrogant, independent man, as true a reformer in medicine as Luther, his contemporary, was in religion and education. He cast aside as worthless all previous medical writers, excepting possibly Hippocrates. He declared his shoe-buckles were more learned than Galen and Avicenna. "The Book of Nature" he said, "is that which the physician should read, and to do so he must walk over its leaves." He practiced his own preaching, went to mines and labored as a miner to learn of metals, not for the gold but for the healing of mankind; he travelled to all countries and talked with boors, shepherds, Jews, gypsies, and tramps, everywhere gathering up knowledge. Browning in his poem, "Paracelsus," gives what is thought a very correct characterization of the man and his noble purposes. After years of searching for knowledge he took a professorship at the University of Basel, and without doubt far surpassed any of his contemporaries in his knowledge of diseases and their treatment. He made the mistake, however, of many reformers, that of swinging too far in the opposite direction. His contemporaries undoubtedly were too much bound to the authority of the ancient writers, but there was much valuable knowledge to be gained from that source and one cannot justify the example set by Paracelsus in his first lecture when, putting sulphur in a chafing dish, he set fire to it, and burned all the books of his predecessors. These doctrines taught by him were too radical for the scholars of Basel. He was compelled to flee from the town and soon after died in a cell from a fracture of the skull inflicted on him by a servant of one of his enemies.

This strange man, most sincere in his purposes, made important contributions to the fields of medicine. He proved that his method of observation was most efficient and by this method added much information to the medical knowledge of his time. He wrote one hundred and six books. His works in chemistry, especially on minerals, marked a distinct advance in this line, and from his time there existed chemical schools of medicine. Paracelsus rebelled against the horrible smelling and tasting concoctions in vogue and taught the use of tinctures and quintessences. He introduced mercury as a cure for syphilis. He first gave the name "laudanum" to the tincture of opium. Antimony was first used internally by Paracelsus, and became the badge of his followers. Paracelsus believed that the virtue of a drug or mineral was dependent upon its spiritual essence. He and others might have come near the truth if they had used a scientific method of determining that essence. They sought, instead, physical indications in accordance with the absurd Doctrine of Signatures, which taught that resemblance to parts of the body indicated certain remedial virtues of drugs. This doctrine dominated therapeutics for an indefinite period. Some think it originated with Paracelsus, but it has prevailed in China for hundreds of years, being still prevalent there, and it sounds more like the old superstitions of India. According to this, yellow drugs were indicated in jaundice; prickly plants like thistles for a stitch in the side; the scales of pine cones for toothache, because they look like the front teeth; the ginseng root of China to give strength, because it divides into branches resembling the arms and legs of a man.

The status of the apothecary in England at the period in which Paracelsus lived in Germany is shown in a set of rules written by an apothecary who was a cousin of Anne Boleyn. Among other things he says:

> The apothecary's garden must be at hand with plenty of herbs, seeds, and roots. He must read Dioscorides. He must have mortars, pots, filters, glasses and boxes clean and sweet. He must have two places in the shop, one most clean for physic and the base place for chirurgic (surgical) stuff. He is neither to increase or diminish the physician's prescription; he is neither to buy or sell rotten drugs. He is only to meddle in his own vocation, and to remember that his office is only to be the physician's cook.

The next century after Paracelsus, the seventeenth, marks the first real progress since the time of Hippocrates. The sciences of chemistry and physics began to develop and their teachings along with the new scientific method of research had a most profound influence on medicine. Mysticism still prevailed, but was gradually being displaced by scientific knowledge. Materia Medica was in a hopeless state. There were great numbers of drugs known and used, many of them absolutely inert. Coupled with this fact was the extreme confidence of the people in drugs, the number, bad taste and foul smell being standards of worth. Consequently prescriptions were advocated containing 20 to 70 different drugs, the so-called "shotgun" prescriptions. The ideas of Paracelsus contrary to this practice had had no effect. But as yet there were known no logical relations between the drugs and disease. Disgusting remedies such as excrements of animals, blood of executed criminals, moss grown on a human skull, earth from a grave, etc., were still in use. Dr. Thomas Willis of this century made a great effort to reform the Materia Medica. His attitude is shown when he writes, "So heedlessly are these executioners (doctors) in the habit of sporting with the human body, while they are led to prepare and administer these dangerous medicines not by any deliberation but by mere hazard and blind impulse."

(To be continued.)

THE OBSTETRICAL NURSE

By SARA B. BOWER, R.N.
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I have often been amused, and at times greatly annoyed, by the point of view so many nurses entertain toward obstetrics. This was first impressed upon me shortly after my graduation, when an experienced nurse with whom I was discussing my plans said to me: "I haven't come down to taking obstetrical cases yet, but, of course, you never can tell." From her tone, I felt that she considered her ability warranted something superior to obstetrics. Since then, I have repeatedly encountered this same intolerance, and only a few days ago, while attending a meeting, it was again brought to my attention. A nurse whom I had not seen for several months asked me about my work and I replied, saying: "Yes! I'm busy, but then, an obstetrical nurse can always be busy."

"Oh! obstetrics," she replied, in a contemptuous tone. "No doubt we'll all come to it; times are so hard."

Why should she feel that she "must come to it?" Why this contempt for obstetrics?—a work which requires as skillful training as anything in the category of nursing, and which at the same time is replete with new problems, new interests and delightful associations. An obstetrical nurse has not one patient, but two, each of whom has different needs. Realizing that the baby is a personality with individual